

patient received an overwhelming and concentrated dose of ether and collapsed. He died twenty-four hours after the operation. Fischer looks upon it as a useful and simple operation.

Saccular Autoplasty in Necrosis of the Intestine from Strangulated Hernia.—LERDA (*Zentralbl. f. Chir.*, 1910, xxxvii, 1339) calls attention to the restricted field for the employment of the omentum in reinforcing sutures in the intestine, or in circumscribing an abdominal organ. The peritoneum has also been used for similar purposes, but not in strangulated herniæ, where it is useful and its technique simple. Often the strangulated portion of the bowel is of doubtful vitality, and is either distinctly necrotic or has already been perforated. Only in the more advanced cases has the gangrene extended to the whole strangulated loop. Generally, the necrosis is limited to the constricted hernial ring, while the remaining portion of the involved bowel is merely the seat of a passive hyperemia. In such cases the choice of operation lies between resection of the suspected intestine, the formation of an artificial anus, or a turning in of the necrotic portion, which is rarely possible, on account of the disturbances in nutrition in the neighboring tissues. In a severe case of strangulated hernia in a woman, aged seventy-four years, Lerda, after so incising the sac as to make a movable flap from it, applied the external surface of this flap over the necrotic band and sutured its free end to the mesenteric attachment of the bowel. An iodoform tampon was introduced into the hernial ring and the wound closed. A fecal fistula resulted. The first stool occurred on the twelfth day, and after that about every second day. On the thirty-fifth day the patient left the hospital with a fistula which would hardly admit a probe. In a second case the same operation was performed, with the exception that instead of the external or bloody surface of the sac, the internal or endothelial surface was applied to the intestine. This patient had a stool on the third day, and regularly afterward. On the sixth day a fecal fistula developed, but it was completely closed twenty-three days after the operation.

THERAPEUTICS.

UNDER THE CHARGE OF

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The Treatment of Syphilis with "606."—IVERSEN (*Munch. med. Woch.*, 1910, lvii, 1723) substantiates results of other observers with his experience at St. Petersburg with 60 patients. He found the intravenous injections more satisfactory. He says that they are less painful than intramuscular injections and, furthermore, enable a more accurate dosage. In addition their action is more rapid and the dose required is smaller. He says that intravenous injection of "606" is usually followed in two or three hours by a chill lasting half an hour, accom-

panied by a rise of temperature, frequently by pains in the limbs, and in some cases by vomiting and fluid stools. The next day the patient feels well except for some weakness. He found spirochetes constantly in the primary chancres before treatment, but was unable to find any two or three days later. He aspirated fluid from the enlarged inguinal glands and found spirochetes constantly before treatment, but after three or four days after the injection of "606" they could not be found. More superficial lesions retrograded more rapidly. Primary scleroses and adenitis required the longest time, taking three or four weeks to disappear. The Wassermann reaction became negative usually between the twentieth and fortieth day after the injection, and in two cases on the eighth and tenth days. He noticed that the reaction became more intense immediately following the injection, and then gradually subsided. No untoward after-effects were observed.

The Treatment of Syphilis with Ehrlich's "606."—NICHOLS and FORDYCE (*Jour. Amer. Med. Assoc.*, 1910, lv, 1171) believe that we have in arsenobenzol a most thorough agent in controlling the manifestations of syphilis that are caused by the presence of treponema. They say that at present the method recommended by Weichselmann seems to be the preferable one for administering the remedy. They call attention to the fact that delay or insufficiency in the amount of mercury in the early treatment of syphilis permits the entire system to become infected by *Treponema pallidum*, and damage to the bloodvessels or important structures takes place which might be prevented by energetic treatment. Although mercury and potassium iodide are efficient in the great majority of cases in controlling the manifestations of the disease, there are certain intractable cases in which they fail to control the symptoms, either on account of idiosyncrasy to one or both of these drugs or other causes. Furthermore, owing to the length of time required in treating a case of this infection patients often become discouraged and cease medication after a few months or a year or two. It is also well known that there are certain cutaneous and general manifestations of syphilis which respond slowly or not at all to mercury, even in heroic doses. Among these may be mentioned certain scaling syphilides of the palms, chronic nodular syphilides in patches of the type which clinically resembles lupus vulgaris, certain forms which affect the flush area of the face and bear a marked clinical resemblance to lupus erythematosus; also mucous membrane affections like leukoplakia, chronic interstitial glossitis, and relapsing deep and superficial lesions of the tongue and throat. Aside from these lesions which are under direct observation, there are the so-called parasyphilitic manifestations, such as tabes, the treatment of which by the classical drugs leaves much to be desired. In malignant syphilis with early destructive lesions and the development of profound cachexia, mercury, moreover, often fails to do good and not infrequently does harm. They conclude that it may reasonably be hoped that all the lesions which depend upon the presence of the organism will be favorably influenced, and the most we can expect in the secondary degenerative changes is that the process may become arrested. Further experiences with the drug will determine with more accuracy the dose which is necessary to bring